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Bib Data Sheet

|                            |                                       |              |                        |                                  |
|----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>10781,513 | FILING DATE<br>02/18/2004<br><br>RULE | CLASS<br>033 | GROUP ART UNIT<br>2859 | ATTORNEY<br>DOCKET NO.<br>346367 |
|----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|

## APPLICANTS

Michael D. Olsen, Heron, MT;

*yes*  
\*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/448,340 02/18/2003

*none*  
\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/12/2004

|  |   |                           |                        |                       |                            |
|--|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i> | STATE OR<br>COUNTRY<br>MT | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>2 |
|--|---|---------------------------|------------------------|-----------------------|----------------------------|

## ADDRESS

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## TITLE

Carpenter's layout tool

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>385 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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